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FAX COVER SHEET

TO: MAIL STOP ISSUE FEE U.S. P.T.O.	From: Leslie Hoffmann Patent Paralegal
Tel. N/A	Tele: 408-284-8484
Fax. 571-273-2885	Date: December 28, 2007
Sheets: Cover + 6	
RE: <u>Applic. S/N 10/630,924 Filed July 31, 2008</u> <u>First Named Inventor: LIM, Shao-Jen, Attorney Docket # IDT-2121A</u>	

Message:

Please find attached:

1. Transmittal;
2. Part B-Issue Fee Transmittal + Duplicate;
3. Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence;
4. Statement Under 27 CFR 3.73(b); and
5. "Fee Address" Indication Form.

Thank you.

Leslie Hoffmann
Patent Paralegal
Integrated Device Technology, Inc.

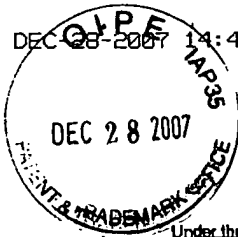
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/630,924
	Filing Date	July 31, 2003
	First Named Inventor	LIM, Shao-Jen
	Art Unit	2614
	Examiner Name	SINGH, Ramnandan F.
Total Number of Pages In This Submission	Attorney Docket Number	IDT- 2121A

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ Remarks _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): FEE ADDRESS INDICATION FORM

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	GREG WARDELL REG. NO. 50,208
Signature	
Date	December 28, 2007

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Signature	
Date	December 28, 2007

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